FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS						
CAMPAIGN TREASURER'S REPORT SUMMARY						
1						
Party Executive Committee						
(5) REPORT	IDENTIFIERS					
Cover Period: From // / DQ / D/ To Oa	3104102 Report Type TR					
Original Amendment Special Elec	tion Report Independent Expenditure Report					
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT					
Cash & Checks \$,, <u>0</u> . <u>6</u> <u>6</u>	Monetary S					
Loans \$	Transfers to San					
Total Monetary \$,	Total Monetary \$,,					
In-kind \$	(8) Other Distributions \$,					
(9) TOTAL Monetary Contributions to Date \$, 2,675.00	(10) TOTAL Monetary Expenditures to Date \$, 2,641.86					
(11) CERTIFICATION It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)						
I certify that I have examined this report and it is true, correct and complete  Jose Losa  Name of Treasurer Deputy Treasurer	I certify that I have examined this report and it is true, correct and complete  Educated R. Rubi D  Name of Candidate Chairman (PC/PTY					
X Signature	X Signature					

DS-DE 12 (02/97)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

10/4

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Eddy R. Rubio	(2) I.D. Number	_3	4
(3) Cover Period	// $\frac{2}{2}$ through $\frac{2}{2}$ $\frac{4}{2}$	(4) Page	/ of	/

(5)	(7)	(8)	(9)	(10)	(11)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
115/01	Alberto Rosell MAMI, Florida.	Graphic design	MOD		325.00
11501	Angel Cruz Minui Beach, Florida.	Podl Worker	MON		325.08
11/15/01	Alberto Rosell Miami, Florida	Poll Worker	MON		150.00
11/17/01	Casablanca Miami, Florida	Volunteers Party	MON		150.00
11/17/01	LEON'S Licquoss. MiANI, Florida	Volunteers Party	Mor		194.90
//	·			A.110	
//				CILA CTERK.2 OLLICE	
//				ICE .	5 2114

## **CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS**

(1) Name	Eddy Rubio			(2)	I.D. Number	·	£
	d <u>// / 2 / 0 /</u> through _	21	4102	(4)	Page	of	
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	Co	(8) ntributor	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	Туре	Occupation	Contribution Type	In-kind Description	Amendment	Amount
//	N/A.		·				
1 1							
11					·	02 FEB	REC
/ /						OZ FEB -4 PH OF TOE	EIVED
//						ra .	
11							
//							
11							394

## **CAMPAIGN TREASURER'S REPORT - FUND TRANSFERS**

(1) Name			(2) I.D. Number			
(3) Cover Period _	/through/		(4) Page	of		
(5) Date (6) Sequence Number	(7)  Name of Financial Institution Street Address & City, State, Zip Code	(8) Transfer Type	(9)  Nature of Account	(10)	(11)	
	N/A.					
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11				OFF ICE	VED 3: 19	
1.1						
//						
11					494	